PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Effective October 1, 2000													016 90
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY		OR	OTHER SMALL	
ТО	TAL CLAIMS		30				1	RATE	FE	Ε		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 355	.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			3 minus 20=		· ro			X\$ 9=	99	100	OR	X\$18=	
IND	EPENDENT CL	AIMS	7 minus 3 =		. 90			X40=		00	OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT		7 0				-		OR		
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=			OR	+270=	
CLAIMS AS AMENDED - PART II								TOTAL	- 44	<u>S</u> · a	POR	TOTAL	
	(Column 3)		SMAL	L ENTI	ГΥ	OR	OTHER SMALL						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADI TION FE	NAL		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=		X40=			OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			OR	+270=	
		•					l	TOTA		_	ΩD	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FE	Ε		On	ADDIT. FEE	•
AMENDMENT B	* * * * * * * * * * * * * * * * * * * *	CLAIMS		HIGH	IEST		1 г		ADI	DI-	1	;	ADDI-
		REMAINING AFTER AMENDMENT	**	PREVIO PAID		PRESENT EXTRA		RATE		IAL		RATE	TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		= .		X40=		Ì	OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405				.070	
								+135= TOTA		—	OR	+270= TOTAL	
									E		OR	ADDIT. FEE	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT C	· · · · · · · · · · · · · · · · · · ·	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=		X40=	1	_	OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									╗			
											OR	+270=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		nber Previously Pa					r fou	und in the	appropria	te box	in col	lumn 1.	

plication or Docket Number